| PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 09/597/3 |   |   |                                       |   |                  |                      |                  |                        |          |                | ber<br>31  |        |
|---|---|---|---------------------------------------|---|------------------|----------------------|------------------|------------------------|----------|----------------|--|--------|
| Effective December 29, 1999   |   |   |                                       |   |                  |                      |                  |                        |          |                | ·.   |        |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                    |   |   |                                       |   |                  |                      | ALL I            | ENTITY                 | OR       | OTHER<br>SMALL |  |        |
| FO  | R   | NUMBE                                     | NUMBER FILED                          |   | NUMBER EXTRA     |                      | TE               | ·FEE                   | 1 1      | RATE           | FEE  | 1      |
| BAS   | SIC FEE   |   |                                       |   |                  |                      | . :              | 345.00                 | ОЯ       |                | 690.00   |        |
| TO  | TAL CLAIMS  | 2   | minus 20                              | )= 2  | 2                |                      | 9÷               |                        | OR       | X\$18=         | <i>3</i> 6-                                      |        |
|   | EPENDENT CLA  |   | minus 3                               | <u> </u>                                    |                  |                      | 39= <sub>.</sub> | •                      | OR       | X78=           |  |        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |   |                                       |   |                  |                      | 30=              |                        | OR       | +260=          |  |        |
| * If the difference in column 1 is less than zero, enter "0" in column 2          |   |   |                                       |   |                  |                      | TAL              | •                      | OR       | TOTAL          | 75/1   |        |
| Claims as amended - Part II   |   |   |                                       |   |                  |                      |                  |                        | <i>-</i> | OTHER          |  |        |
| (Column 1) (Column 2) (Column 3)  |   |   |                                       |   |                  | SW.                  | ALL              | ENTITY                 | OR<br>1  | SMALL          |  | }      |
| ENT &   | * 4 4   | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA | P.                   | ATE              | ADDI-<br>TIONAL<br>FEE |          | RATE           | ADDI-<br>TIONAL<br>FEE./                         | N V VI |
| AMENDMENT   | Total   | 22  | Minus                                 | -22   | - 1              | X                    | 9=               | . /                    | OR       | X\$18=         |  | 6      |
| E   | Independent   | A .                                       | Minus                                 | <u>~'3</u>                                  | -4               | X                    | 39±              |                        | OR       | X78=           |  | 6      |
|   | FIRST PRESEN  | ITATION OF MI                             | JLTIPLE DEP                           | ENDENT CLAIM                                |                  | +1                   | 30 <del>=</del>  |                        | OR       | +260=          |  | 0      |
|   | DIT   | - 0                                       | aC 3                                  | als.  |                  | <u> </u>             | TOTAL            |                        | OR       | TOTAL          | <del></del>                                      | }      |
|   | LCF G-08-2005 (Column 1) (Column 2) (Column 3)  |   |                                       |   |                  |                      | T. FEE           |                        | J)       | ADDIT. FEE     |  | ┢      |
| MT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | R                    | ATE              | ADDI-<br>TIONAL<br>FEE |          | RATE           | ADDI-<br>TIONAL<br>FEE                           |        |
| SO PA   | Total   | . 22                                      | Minus                                 | 22  | ÷'               | X                    | 9=               |                        | OR       | X\$18=         | . ,  |        |
| AMENDMENT   | Independent   | · 3                                       | Minus                                 | <u> 3</u>                                   | e .              | X                    | 39=              | 7                      | OR       | X78=           |  |        |
|   | FIRST PRESENTATION OF MULTIPLE DE   |   |                                       | ENDENT CLAIM                                | 1                | <del>-/</del><br>30≕ | 7                | ОЯ                     | +260=    | 1.             | 1  |        |
|   |   | ,   |                                       |   |                  | _                    | TOTAL            |                        | OR       | TOTAL          | <del>/                                    </del> | ┨      |
| (Column 1) (Column 2) (Column 2)  |   |   |                                       |   |                  | ADO                  | T. FEE           | L                      | a        | ADOIT. FEE     |  | 1      |
| CIT   | 1 1 1 1 1 1 1   | CLAIMS<br>REMAINING<br>AFTER              |                                       | HIGHESY<br>NUMBER<br>PREVIOUSLY             | PRESENT          | R                    | ATE              | ADDI-<br>TIONAL        |          | RATE           | ADDI-<br>TIONAL                                  |        |
| ) PAE   | Total   | • 22                                      | Minus                                 | PAID FOR                                    | = //             |                      | 9=               | FEE                    | 1        | X\$18=         | FEE  | 1      |
| AMENDMENT   | Independent   | . 2                                       | Minus                                 | ••• 3                                       | = /              | 1 -                  |                  |                        | ØŔ       |                | <del> </del>                                     | 1      |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                       |   |                  |                      | 39=              |                        | OR       | X78=           | <b> </b>   | 4      |
|   |   |   |                                       |   |                  |                      |                  |                        | OR       | +260=          |  |        |
| H   | "If the entry in column 1 is less than the entry in column 2, write "of in column 3.  "If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                                       |   |                  |                      |                  |                        |          |                |  |        |

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